



The Regulation and  
Quality Improvement  
Authority

Nazareth House Care Village  
RQIA ID: 1638  
516 Ravenhill Road  
Belfast  
BT6 0BW

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**Unannounced Finance Inspection  
of  
Nazareth House Care Village**

**18 & 28 January 2016**

The Regulation and Quality Improvement Authority  
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)

## Summary of Inspection

An unannounced finance inspection of the nursing home took place on 18 January 2016 from 11.40 to 16.40, a further inspection of the residential home took place on 28 January 2016 from 10:40 to 12:15. A poster detailing that the inspection was taking place was positioned at the entrance to the home. Discussion was held with Mrs Jenny Hall, the registered person; Mrs Patricia McMullan, the registered manager, Ms Margaret Devine the deputy manager in relation to the nursing inspection. Discussion was held with Siobhan Regan, registered manager in relation to the residential inspection. No relatives or visitors chose to meet with us during the inspection.

Overall on the day of the inspection, the financial arrangements in place were found to be contributing to safe, effective and compassionate care; however some areas for improvement were identified, which are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Nursing Homes Regulations (Northern Ireland) 2005 and the Residential Care Homes Regulations (Northern Ireland) 2005

The home provides care for those requiring both nursing and residential care; pursuant to the language within the Nursing Homes Regulations (Northern Ireland) 2005, the term "patient" will be used throughout and the term "resident" for the section within this report for the residential inspection.

### 1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

### 1.2 Actions/Enforcement Resulting from this Inspection

Enforcement did not result from the findings of this inspection.

### 1.3 Inspection Outcome

|   | Requirements | Recommendations |
|---|--------------|-----------------|
| <b>Total number of requirements and recommendations made at this inspection</b> | 1            | 7               |

The details of the QIP within this report were discussed with Mrs Jenny Hall, the registered person, Mrs Patricia McMullan, the registered manager (nursing inspection) and Siobhan Regan, registered manager (residential inspection), as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

|   |  |
|---|--|
| <b>Registered Organisation/Registered Person:</b><br>Poor Sisters of Nazareth/Mrs Jenny Hall  | <b>Registered Manager:</b><br>Mrs Patricia McMullan(Nursing)<br>Ms Siobhan Regan (residential) |
| <b>Person in Charge of the Home at the Time of Inspection:</b><br>Mrs Patricia McMullan (Nursing)<br>Ms Siobhan Regan (residential) | <b>Date Manager Registered:</b><br>30 September 2008 (Nursing)<br>26 May 2010 (Residential)    |
| <b>Categories of Care:</b><br>NH-I, NH-PH, NH-PH (E), NH-TI<br>RC-DE, RC-I  | <b>Number of Registered Places:</b><br>48 (Nursing)<br>22 (Residential)                        |
| <b>Number of Patients/residents Accommodated on the Day of Inspection:</b> 48 (Nursing)<br>22 (residential)                         | <b>Weekly Tariff at Time of Inspection:</b><br>£775.00   |

## 3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following theme has been met:

**Inspection Theme: Patients' finances and property are appropriately managed and safeguarded.**

### Statement 1

The home maintains complete and up to date records in respect of the terms and conditions of the provision of accommodation and personal care.

### Statement 2

Arrangements for receiving and spending patients' monies on their behalf are transparent, have been authorised and the appropriate records are maintained.

### Statement 3

A safe place is provided within the home premises for the storage of money and valuables deposited for safekeeping; clear, up to date and accurate records are maintained.

### Statement 4

Arrangements for providing transport to patients are transparent and agreed in writing with the patient/their representative.

#### 4. Methods/Process

Specific methods/processes used in this inspection include the following:

- Discussion with Mrs Jenny Hall, the registered person; Mrs Patricia McMullan, the registered manager, Ms Margaret Devine, the deputy manager and Siobhan Regan, registered manager (residential)
- Review of records
- Evaluation and Feedback.

Prior to inspection the following records were analysed:

- Records of incidents notified to RQIA in the last twelve months; no finance-related incidents were noted.

The following records were reviewed during the inspection:

- The patient guide
- Four patient agreements
- The home's "Policy on the Safeguarding of Residents' Money and Valuables"
- The "Nazareth House Care Village Policy on Residents' Comfort Fund"
- A sample of income and expenditure records
- A sample of "Audit of Monies" records
- A sample of hairdressing and podiatry treatment receipts
- Three patients' personal property records
- A sample of comfort fund records.

#### 5. The Inspection

##### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection carried out on 24 August 2015; the care inspector was contacted prior to this inspection and confirmed that there were no matters to be followed up from the previous inspection.

##### 5.2 Review of Requirements and Recommendations from the Last Finance Inspection

There has been no previous RQIA finance inspection of the home.

##### 5.3 Statement 1 - The home maintains complete and up to date records in respect of the terms and conditions of the provision of accommodation and personal care.

###### Is Care Safe?

The home has a patient guide which is provided to newly admitted patients. We noted that the guide included information on: fees and the arrangements for payment of fees, and the range of additional services facilitated within the home for which there is an additional charge, including the current charges for hairdressing and podiatry services. We noted that a comprehensive list of services which were included in the fee was also detailed in the guide.

The guide makes clear that patients are welcome to bring photographs and other small items in order to personalise their rooms. The guide also contains a copy of the home's written policy on "Safeguarding of Residents' Money and Valuables" which clearly sets out these arrangements and the responsibilities of both the patient and the home respectively. The home also provides a written agreement "Resident Contract" to newly admitted patients, this is further discussed below.

### **Is Care Effective?**

We selected a sample of four patients at random in order to view the signed agreements in place with the home. All four patients had a written agreement in place with the agreements in place for three of the four patients detailing the current fees applicable. However one of the patients selected had been resident in the home longer than the other patients selected within the sample; and their agreement reflected the fee which was applicable at the time the patient was admitted to the home.

We evidenced on this person's file, a letter detailing the proposed increase in the fee to the current level which had been sent to the patient's representative. However, as noted above, the patient's agreement had not been updated. We highlighted this to those present during feedback and noted that any changes to a patient's agreement, including the fees payable, must be agreed in writing. The registered person explained the difficulty in securing a signature from family representatives in this regard. We acknowledged this but noted that there must be evidence on the patient's file to demonstrate that there has been an attempt by the registered person to secure signature.

A recommendation was made in respect of this finding.

As noted above, the home has a clear written policy and procedure addressing "Residents' Money and Valuables".

### **Is Care Compassionate?**

A review of a sample of written agreements evidenced that notice of changes to each patient's agreement (increase in the fee) had been provided in writing in a timely manner by the home. We noted that these notifications were given the heading "Addendum to Resident Contract".

A copy of the policy on the safeguarding of residents' money and valuables is also provided within each patient's room.

## **3.1 Residential Inspection**

This area was not inspected at the residential inspection.

### **Areas for Improvement**

Overall on the day of inspection, the financial arrangements were found to be contributing to safe, effective and compassionate care. However there was one area identified for improvement. This related to ensuring that any changes to a patient's individual agreement are agreed in writing by the patient or their representative.

|                               |          |                                |          |
|-------------------------------|----------|--------------------------------|----------|
| <b>Number of Requirements</b> | <b>0</b> | <b>Number Recommendations:</b> | <b>1</b> |
|-------------------------------|----------|--------------------------------|----------|

#### **5.4 Statement 2 - Arrangements for receiving and spending patients' monies on their behalf are transparent, have been authorised and the appropriate records are maintained.**

##### **Is Care Safe?**

Copies of the HSC payment remittances were available to detail payment arrangements for patients in the home. Discussion with the registered person and a review of the records established that a number of the patients were contributing to their care costs. We reviewed the charges being made to a sample of those contributing to their care and noted that the amounts charged to the respective patients was correct.

The registered person confirmed that no personal allowances or Social Security benefits were received by the home on behalf of any patient. It was noted that it was not the home's policy for any representative of the home to act as nominated Appointee for any patient and this was clearly detailed in the home's written policy on resident's money and valuables referred to above.

For some patients in the home, family representatives deposited a small amount of money with the home for safekeeping in order to pay for additional goods and services not covered by the weekly fee (such as for hairdressing, podiatry etc.).

Records of income and expenditure were maintained detailing transactions for individual patients. Entries were signed and dated by two people and a written record of monthly checks of the sheets and cash balances conducted by the deputy manager was reviewed. The registered person also described the other review processes in place to audit the patients' monies on a regular basis and records were available which evidenced an audit carried out by the registered person and the deputy manager routinely, on a quarterly basis.

We sampled a number of transactions from the records and were able to trace these entries to the corresponding records to substantiate each transaction, such as a hairdressing treatment receipt.

We reviewed a sample of treatment receipts provided by the hairdressers and the podiatrist who visit the home to provide services to patients. We noted that the receipts provided detail of the person treated and the nature of the treatment itself and that they were routinely signed by the hairdresser/podiatrist. We highlighted that these records/receipts should also be signed by a representative of the home who could verify that the patient had received the detailed treatment and incurred the related cost.

A recommendation was made in respect of this finding.

Discussion with the registered person established that the home operated a comfort fund for the benefit of the patients in the home. Clear, up to date records relating to income and expenditure for the fund were maintained and a weekly and monthly reconciliation of the comfort fund monies was recorded, signed and dated by two people; good practice was observed.

We queried whether the home had a written policy and procedure in place for the operation of the comfort fund; the registered person stated that she believed there was a written policy and noted that if it was located, it would be shared with the inspector. The day after the inspection, a copy of the home's detailed written policy and procedure was provided.

#### **5.4.1 Is Care Safe? (Residential Inspection)**

Discussion with staff and review of records confirmed that transaction sheets were maintained on behalf of residents. The sheets were used to record purchases made on behalf of residents and payments for additional services e.g. hairdressing. The transaction sheets were also used to record monies deposited at the home on behalf of residents.

Review of six records of payments to the hairdresser showed that the hairdresser issued a receipt when receiving payment for the service provided. Details on the receipt included the name of the resident and the service provided. We noticed that the hairdresser had not signed the receipts to confirm payment.

Discussion with staff confirmed that the hairdressing receipts were used to update residents' transaction sheets with the amount withdrawn from residents' monies to pay for the service. We reviewed entries in the transaction sheets for the above payments, the amounts recorded in the residents' transaction sheets corresponded with the amounts listed on the hairdressing receipts.

As previously stated within this report a recommendation is listed within the QIP in relation to the signing of receipts.

Review of records of monies deposited at the home on behalf of three residents showed that the amounts received were recorded in the residents' transaction sheets. Two signatures were recorded against each entry in the sheets. Discussion with staff confirmed that two staff members signed the sheets; no receipts were issued to the person depositing the monies. We noticed that the person depositing the monies did not sign the transaction sheet in the absence of a receipt.

A recommendation is listed within the QIP of this report in relation to this finding.

Review of records of four purchases made on behalf of a resident showed that receipts were available for only one of the purchases. Two signatures were recorded against each entry in the resident's transaction sheet.

A recommendation is listed within the QIP of this report for receipts to be retained from all purchases made on behalf of residents.

#### **Is Care Effective?**

As noted above, the home receives money from patients' representatives for expenditure on other goods and services not covered by the weekly fee.

A review of a sample of four patients' files established that a written personal monies authorisation agreement was in place.

#### **Is Care Compassionate?**

We queried whether any patient had a specific assessed need in respect of their money or any agreed restrictions; the registered person and registered manager confirmed that none of the current patients had any known assessed need in respect of their money.

It was clarified that as a senior member of staff (across every shift) had access to the safe place containing patient monies, therefore patients had access to their monies at all times.

#### **i.4.2 Is Care Compassionate? (Residential Inspection)**

Review of three residents' files confirmed good practice as written authorisations were retained in all three files. The authorisations listed the items staff were permitted to purchase and the services to be paid on behalf of residents e.g. hairdresser. We noticed that the authorisation form in one file was not signed by the resident or their representative.

A recommendation is listed within the QIP in relation to the above findings.

#### **Areas for Improvement**

Overall on the day of inspection, the financial arrangements in place were found to be contributing to safe, effective and compassionate care. However, there were four areas identified for improvement; these related to ensuring that any treatment facilitated within the home is evidenced by a member of staff on the respective treatment records, issuing of receipts when monies deposited at the home on behalf of residents, retention of receipts from all purchases made on behalf of residents (where possible) and resident or their representative to sign consent form.

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|-------------------------------|----------|--------------------------------|----------|
| <b>Number of Requirements</b> | <b>0</b> | <b>Number Recommendations:</b> | <b>4</b> |
|-------------------------------|----------|--------------------------------|----------|

#### **5.5 Statement 3 - A safe place is provided within the home premises for the storage of money and valuables deposited for safekeeping; clear, up to date and accurate records are maintained.**

##### **Is Care Safe?**

A safe place exists within the home to enable patients' monies to be stored securely. We viewed the location of the safe place and were satisfied with the home's controls around access to the safe place. On the day of inspection, no valuables belonging to patients were deposited for safekeeping; cash balances were held for a number of patients.

We noted that a clear record of the money deposited for safekeeping on behalf of patients was checked on a regular basis as described in Statement 2 above.

##### **5.5.1 Is Care Safe? (Residential Inspection)**

A safe place was provided within the home for the retention of residents' monies and valuables. No valuables were held on behalf of residents at the time of the inspection.

We counted the monies held on behalf of three residents; a slight variance was noticed between the amount held and the amount recorded as being held for one resident. Discussion with staff and review of records confirmed that outstanding hairdressing receipts were still to be recorded in the resident's transaction sheets.

A requirement is listed within the QIP of this report for the monies held on behalf of residents to be reconciled and any variances recorded; an explanation for any variances should also be recorded.



A recommendation is also listed for the system of recording transactions on behalf of residents to be reviewed in order to facilitate accurate recording and to aid the audit process.

### **Is Care Effective?**

As noted above, we discussed whether there were any general or specific arrangements in place to support any patients with their money; it was noted that there were none. We requested the inventory/property records for three patients and were provided with a record for each of the patients sampled. We noted that a template was in use to record items and that there was evidence that at least two of the three sampled records had been updated to reflect new items brought into the respective patients' rooms. We highlighted however, that every entry, whether an addition or disposal, must be signed and dated by two people. Within records, only one person had signed an addition and an addition which had not been signed was also evidenced.

A recommendation was made in respect of this finding.

### **Is Care Compassionate?**

A safe place exists within the home to enable patients or their representatives to deposit cash or valuables should they wish to. We queried how a new patient or their representative would know that the home has safe storage available; the registered person highlighted that these matters are explained to the patient and their families on admission. Details are also provided in the home's guide and on an A5 information sheet in each patient's room.

### **Areas for Improvement**

Overall on the day of inspection, the financial arrangements were found to be contributing to safe, effective and compassionate care. There were three areas for improvement identified in respect of Statement 3; these related to records of patients' property in their rooms, reconciliation of monies held on behalf of residents and a review of the system for recording transactions on behalf of residents.

|                               |          |                                |          |
|-------------------------------|----------|--------------------------------|----------|
| <b>Number of Requirements</b> | <b>1</b> | <b>Number Recommendations:</b> | <b>2</b> |
|-------------------------------|----------|--------------------------------|----------|

## **5.6 Statement 4 - Arrangements for providing transport to patients are transparent and agreed in writing with the patient/their representative.**

### **Is Care Safe, effective and compassionate?**

The home does not provide transport services to patients.

### **Areas for Improvement**

There were no areas of improvement identified in respect of Statement 4.

|                               |          |                                |          |
|-------------------------------|----------|--------------------------------|----------|
| <b>Number of Requirements</b> | <b>0</b> | <b>Number Recommendations:</b> | <b>0</b> |
|-------------------------------|----------|--------------------------------|----------|

## 6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Jenny Hall, the registered person, Mrs Patricia McMullan, the registered manager and Siobhan Regan, registered manager (residential), as part of the inspection process. The timescales commence from the date of inspection.

The registered person/managers should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

### 6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Nursing Homes Regulations (Northern Ireland) 2005 and The Residential Care Homes Regulations (Northern Ireland) 2005.

### 6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources, Care Standards for Nursing Homes (April 2015) and The Residential Care Homes Minimum Standards (2011) etc. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

### 6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/registered managers and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to [finance.team@rqia.org.uk](mailto:finance.team@rqia.org.uk) and assessed by us.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained in this report do not absolve the registered provider/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

| Quality Improvement Plan  |  |
|---|--|
| Statutory Requirements  |  |
| <b>Requirement 1</b><br><br><b>Ref:</b> Residential Regulation 19 (2) Schedule 4 (9) (a)<br><br><b>Stated:</b> First time<br><br><b>To be Completed by:</b> From the date of inspection.                    | <p>The registered person must ensure that monies held on behalf of residents are reconciled following the inspection. Any variances are to be recorded with an explanation for the variance.</p> <p><b>Response by Registered Person(s) Detailing the Actions Taken:</b><br/> <i>THIS REQUIREMENT WAS ACTIONED ON 29/1/16 AND RECONCILIATION ACHIEVED. A MISCALCULATION DUE TO HUMAN ERROR HAD BEEN THE CAUSE OF A VARIANCE.</i></p>   |
| Recommendations   |  |
| <b>Recommendation 1</b><br><br><b>Ref:</b> Nursing Standard 2.8<br><br><b>Stated:</b> First time<br><br><b>To be Completed by:</b> From the date of the next change in each patient's individual agreement. | <p>The registered person should ensure that any changes to the individual agreement are agreed in writing by the resident or their representative. The individual agreement should be updated to reflect any increases in charges payable. Where the resident or their representative is unable or chooses not to sign the revised agreement, this is recorded.</p> <p><b>Response by Registered Person(s) Detailing the Actions Taken:</b><br/> <i>THIS HAS BEEN ACTIONED ON FEE INCREASE LETTERS POSTED ON 26/2/16. TWO COPIES WERE SENT TO ALL RESIDENTS/REPRESENTATIVES. A SECTION HAS BEEN ADDED TO THE LETTERS REQUESTING THAT ONE COPY IS SIGNED, DATED &amp; RETURNED. A SECOND COPY WAS SENT FOR RETENTION BY FAMILIES.</i></p> |
| <b>Recommendation 2</b><br><br><b>Ref:</b> Nursing Standard 14.13<br><br><b>Stated:</b> First time<br><br><b>To be Completed by:</b> From the date of inspection.   | <p>The registered person should ensure that where any service is facilitated within the home (such as, but not limited to, hairdressing, chiropody or visiting retailers) the person providing the service and the resident or a member of staff of the home signs the treatment record or receipt to verify the treatment or goods provided and the associated cost to each resident.</p> <p><b>Response by Registered Person(s) Detailing the Actions Taken:</b><br/> <i>THIS HAS BEEN ACTIONED AND HIGHLIGHTED TO ALL CONCERNED. COMPLIANCE WILL BE MONITORED DURING THE HOME'S INTERNAL, QUARTERLY, FINANCIAL AUDITS.</i></p>  |

|   |  |
|---|--|
| <p><b>Recommendation 3</b></p> <p><b>Ref:</b> Nursing Standard 14.26</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b><br/>From the date of inspection.</p>    | <p>The registered person should ensure that an inventory of property belonging to each resident is maintained throughout their stay in the home. The inventory record should be reconciled at least quarterly. The record should be signed and dated by the staff member undertaking the reconciliation and countersigned by a senior member of staff.</p> <p><b>Response by Registered Person(s) Detailing the Actions Taken:</b><br/>THIS HAS BEEN ACTIONED AND COMPLIANCE WILL BE MONITORED DURING THE REGISTERED PROVIDER'S MONTHLY MONITORING VISITS.</p>                           |
| <p><b>Recommendation 4</b></p> <p><b>Ref:</b> Residential Standard 15.7</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b><br/>From the date of inspection.</p> | <p>The registered person should ensure that receipts are issued at all times when monies are deposited at the home on behalf of residents. The person depositing the monies should be one of the signatures in the receipt book.</p> <p>Where the person depositing the money is unable to sign or chooses not to sign two members of staff witness the hand over and sign and date the record.</p> <p><b>Response by Registered Person(s) Detailing the Actions Taken:</b><br/>THIS HAS BEEN ACTIONED AND WILL BE MONITORED DURING THE HOME'S INTERNAL, QUARTERLY FINANCIAL AUDITS.</p> |
| <p><b>Recommendation 5</b></p> <p><b>Ref:</b> Residential Standard 15.7</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b><br/>From the date of inspection.</p> | <p>The registered person should ensure that receipts are retained from all purchases made on behalf of residents (where possible). Where a receipt is not available, the record should be annotated to reflect this.</p> <p><b>Response by Registered Person(s) Detailing the Actions Taken:</b><br/>THIS HAS BEEN ACTIONED AND WILL BE MONITORED DURING THE HOME'S INTERNAL, QUARTERLY FINANCIAL AUDITS.</p>  |
| <p><b>Recommendation 6</b></p> <p><b>Ref:</b> Residential Standard 15.2</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b><br/>11 March 2016.</p>               | <p>The registered person should ensure that the consent form for the resident, identified during the inspection, is signed by the resident or their representative (if resident lacks capacity to make decisions in relation to the management of their finances).</p> <p>A copy of the signed document should be retained in the resident's file.</p> <p><b>Response by Registered Person(s) Detailing the Actions Taken:</b><br/>THE ONE OUTSTANDING CONSENT FORM HAS BEEN SIGNED AND RETAINED ON THE RESIDENT'S FILE AS PER ABOVE.</p>  |

|   |   |
|---|---|
| <b>Recommendation 7</b>                   | The registered person should ensure that the procedure of recording transactions on behalf of residents is reviewed in order to facilitate accurate recording and to aid the audit process (e.g. timelier recording of transactions). |
| <b>Ref:</b> Residential Standard 20.14    |   |
| <b>Stated:</b> First time                 | <b>Response by Registered Person(s) Detailing the Actions Taken:</b>  |
| <b>To be Completed by:</b> 11 March 2016. | THIS HAS BEEN REVIEWED AND ACTIONED IN LINE WITH THE ABOVE RECOMMENDATION AND THIS WILL BE FURTHER REVIEWED WHEN OUR INTERNAL, QUARTERLY FINANCIAL AUDIT TAKES PLACE.   |

|   |   |                       |           |
|---|---|-----------------------|-----------|
| <b>Registered Manager Completing QIP</b><br>SIOBHAN REGAN - PATRICIA MCMULLAN | <i>Siohán Regan</i><br><i>Patricia McMullan</i> | <b>Date Completed</b> | 11/3/2016 |
| <b>Registered Person Approving QIP</b><br>JENNY HALL                          | <i>Jenny Hall</i>                               | <b>Date Approved</b>  | 11/3/2016 |
| <b>RQIA Inspector Assessing Response</b>                                      | <i>John McNaught</i>                            | <b>Date Approved</b>  | 8/4/16    |

*\*Please ensure this document is completed in full and returned to [finance.team@rqia.org.uk](mailto:finance.team@rqia.org.uk) from the authorised email address\**

|  |                      |                      |          |
|--|----------------------|----------------------|----------|
| <b>RQIA Inspector Assessing Response (Nursing)</b>     | <i>[Signature]</i>   | <b>Date Approved</b> | 08/04/16 |
| <b>RQIA Inspector Assessing Response (Residential)</b> | <i>John McNaught</i> | <b>Date Approved</b> | 8/4/16   |

